

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (1-21)**  
**STATE: SC**  
**APPLICATION YEAR: 2006**

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<b>APPLICATION FOR FEDERAL ASSISTANCE</b>		2. DATE SUBMITTED <b>7/14/2005</b>	APPLICANT IDENTIFIER <b>393706</b>
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER
5. APPLICANT INFORMATION			
Legal Name: <b>State of South Carolina</b>		Organizational Unit: <b>Department of Health and Environmental Control</b>	
Address (give city, county, state and zip code) <b>2600 Bull Street</b>  <b>Columbia, SC 29201</b> County: <b>Richland</b>		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: <b>Harvey Kayman</b> Tel Number: <b>803-898-3780</b>	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">5</div><div style="border: 1px solid black; padding: 2px 5px;">7</div><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">2</div><div style="border: 1px solid black; padding: 2px 5px;">8</div><div style="border: 1px solid black; padding: 2px 5px;">6</div></div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) <b>A</b> A. State                      H. Independent School District B. County                  I. State Controlled Institution of Higher Learning C. Municipality           J. Private University D. Township              K. Indian Tribe E. Interstate              L. Individual F. Intermunicipality     M. Profit Organization G. Special District      N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision  If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: <b>Health Resources and Services Administration, Maternal and Child Health Bureau</b>	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div> TITLE: <b>Maternal and Child Health Services Block Grant</b>		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): <b>Statewide</b>			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: <b>10/01/2005</b>	Ending Date: <b>09/30/2006</b>	a. Applicant <b>6th District</b>	b. Project
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:  b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
a. Federal	\$ <u>11,900,111.00</u>		
b. Applicant	\$ <u>0.00</u>		
c. State	\$ <u>11,729,452.00</u>		
d. Local	\$ <u>11,398,236.00</u>		
e. Other	\$ <u>769,931.00</u>		
f. Program Income	\$ <u>20,176,611.00</u>		
g. TOTAL	\$ <u>55,974,341.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative <b>Lisa F. Waddell, MD, MPH</b>		b. Title <b>Deputy Commissioner, Health Services</b>	c. Telephone Number <b>803-898-0806</b>
d. Signature of Authorized Representative		e. Date Signed	

Previous Editions Not Usable

Standard Form 424 (REV. 4-88)  
Prescribed by OMB A-102

**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2006**

[Secs. 504 (d) and 505(a)(3)(4)]

**STATE: SC**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])  
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 11,900,111

A.Preventive and primary care for children:

\$ 5,369,640 ( 45.12%)

B.Children with special health care needs:

\$ 3,836,907 ( 32.24%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 820,334 ( 6.89%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 0

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 11,729,452

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 11,398,236

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 769,931

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 20,176,611

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 11,445,966

\$ 44,074,230

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 55,974,341

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 148,921

d. Abstinence Education: \$ 751,961

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 67,846,075

h. AIDS: \$ 1,310,840

i. CDC: \$ 1,493,187

j. Education: \$ 5,885,840

k. Other:

African Am Risk Red \$ 562,500

Child Restr Safely \$ 204,230

Family Planning \$ 5,836,514

Integrtd Svcs CSHCN \$ 141,864

Oral Health Sys Dev \$ 58,882

Univ Newborn Hear Sc \$ 150,000

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 84,490,814

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 140,465,155

## FORM NOTES FOR FORM 2

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** FedAlloc  
**Row Name:** Federal Allocation  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
A new budget analyst has been assigned to work with the MCH Block Grant for South Carolina. The methodologies used for computing the numbers are being revised to align more closely with our agency's policies. In some cases, the amounts have shifted between categories and sub-categories.
2. **Section Number:** Main  
**Field Name:** ProgramIncome  
**Row Name:** Program Income  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The amount of program income will be less in FY06 because 1)Our state's reduction of Family Support Services income; rate changes and allowable services; and 2)Our Family Planning Enhanced Services income will be reduced because the majority of what we have been billing will no longer be allowable.

**FORM 3**  
**STATE MCH FUNDING PROFILE**

[Secs. 505(a) and 506(a)(1-3)]

**STATE: SC**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> (Line1, Form 2)	\$ 12,047,011	\$ 11,013,174	\$ 12,133,794	\$ 0	\$ 11,900,111	\$ 0
<b>2. Unobligated Balance</b> (Line2, Form 2)	\$ 945,481	\$ 237,228	\$ 1,703,555	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> (Line3, Form 2)	\$ 23,530,606	\$ 11,847,838	\$ 21,454,290	\$ 0	\$ 11,729,452	\$ 0
<b>4. Local MCH Funds</b> (Line4, Form 2)	\$ 3,320,687	\$ 8,226,325	\$ 3,022,090	\$ 0	\$ 11,398,236	\$ 0
<b>5. Other Funds</b> (Line5, Form 2)	\$ 498,163	\$ 316,491	\$ 726,187	\$ 0	\$ 769,931	\$ 0
<b>6. Program Income</b> (Line6, Form 2)	\$ 41,551,061	\$ 22,632,923	\$ 41,144,871	\$ 0	\$ 20,176,611	\$ 0
<b>7. Subtotal</b> (Line8, Form 2)	\$ 81,893,009	\$ 54,273,979	\$ 80,184,787	\$ 0	\$ 55,974,341	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> (Line10, Form 2)	\$ 101,490,250	\$ 97,399,977	\$ 99,018,310	\$ 0	\$ 84,490,814	\$ 0
<b>9. Total</b> (Line11, Form 2)	\$ 183,383,259	\$ 151,673,956	\$ 179,203,097	\$ 0	\$ 140,465,155	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: SC**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 11,972,698	\$ 12,062,414	\$ 11,865,039	\$ 11,437,037	\$ 11,846,832	\$ 11,411,574
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 1,369,501	\$ 307,622	\$ 863,970	\$ 519,500	\$ 402,413	\$ 88,404
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 25,732,339	\$ 25,663,856	\$ 25,821,440	\$ 22,256,531	\$ 24,064,026	\$ 22,376,755
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 2,808,369	\$ 2,639,754	\$ 2,961,928	\$ 2,639,626	\$ 3,019,928	\$ 2,333,578
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 1,660,254	\$ 1,703,853	\$ 943,851	\$ 843,123	\$ 941,339	\$ 238,065
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 34,850,050	\$ 31,801,556	\$ 32,000,555	\$ 33,302,215	\$ 35,925,114	\$ 35,660,588
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 78,393,211	\$ 74,179,055	\$ 74,456,783	\$ 70,998,032	\$ 76,199,652	\$ 72,108,964
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 87,298,940	\$ 100,893,626	\$ 86,904,457	\$ 100,262,223	\$ 89,984,435	\$ 98,984,707
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 165,692,151	\$ 175,072,681	\$ 161,361,240	\$ 171,260,255	\$ 166,184,087	\$ 171,093,671
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Funds that were not expended were spent during the following fiscal years.
2. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**
3. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Funds that were not expended were carried forward to the next grant year.
4. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
State budget cuts during the year made less state funds available to spend. Due to a change in our methodology, some of the funds originally reported as budgeted in FY04 have expenditures reported on the Local MCH funds line.
5. **Section Number:** Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Shift in source of funds expended.
6. **Section Number:** Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Funds that were listed on the FY04 budgeted amount for State Funds are now reported spent on the line for Local Funds
7. **Section Number:** Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Shift in source of funds expended.
8. **Section Number:** Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The RWJ fund for Oral Health was in the beginning stages and during year one, budget funds were not able to be spent and were carryforward into year two.
9. **Section Number:** Main  
**Field Name:** ProgramIncomeExpended  
**Row Name:** Program Income  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Revenue earned and expenses incurred on both the local and state levels are included; however, sometimes expenditures are incurred in one level while the revenue may be earned at another level. Changes in our methodology have shifted expenditures from the categorical lines that they were reported as budgeted in the past.  
A new budget analyst has been assigned to work with the MCH Block Grant for South Carolina. The methodologies used for computing the numbers are being revised to align more closely with our agency's policies. In some cases, the amounts have shifted between categories and sub-categories
10. **Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Shift in source of funds expended.
11. **Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**

The WIC Rebate funds only expended one third of the funds that were budgeted.



**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: SC**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 9,814,027	\$ 2,327,728	\$ 2,552,580	\$ 0	\$ 2,400,654	\$ 0
b. Infants < 1 year old	\$ 5,540,281	\$ 4,201,977	\$ 5,285,316	\$ 0	\$ 4,333,621	\$ 0
c. Children 1 to 22 years old	\$ 17,429,374	\$ 16,023,964	\$ 16,627,272	\$ 0	\$ 16,525,982	\$ 0
d. Children with Special Healthcare Needs	\$ 14,437,504	\$ 10,113,147	\$ 20,427,890	\$ 0	\$ 10,429,985	\$ 0
e. Others	\$ 33,770,764	\$ 18,600,912	\$ 34,356,258	\$ 0	\$ 19,183,664	\$ 0
f. Administration	\$ 901,059	\$ 3,006,251	\$ 935,471	\$ 0	\$ 3,100,435	\$ 0
g. SUBTOTAL	\$ 81,893,009	\$ 54,273,979	\$ 80,184,787	\$ 0	\$ 55,974,341	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 129,453		\$ 100,000	
c. CISS	\$ 112,600		\$ 154,345		\$ 148,921	
d. Abstinence Education	\$ 811,757		\$ 768,041		\$ 751,961	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 87,847,345		\$ 84,914,512		\$ 67,846,075	
h. AIDS	\$ 560,340		\$ 585,340		\$ 1,310,840	
i. CDC	\$ 1,070,016		\$ 845,000		\$ 1,493,187	
j. Education	\$ 5,557,240		\$ 5,783,293		\$ 5,885,840	
k. Other						
African Am Risk Red	\$ 0		\$ 0		\$ 562,500	
Child Restr Safely	\$ 0		\$ 0		\$ 204,230	
Family Planning	\$ 0		\$ 5,596,566		\$ 5,836,514	
Integrtd Svcs CSHCN	\$ 0		\$ 0		\$ 141,864	
Oral Health Sys Dev	\$ 0		\$ 0		\$ 58,882	
Univ Newborn Hear Sc	\$ 0		\$ 0		\$ 150,000	
Univ Newborn Hearing	\$ 121,000		\$ 241,760		\$ 0	
Fam Planning Title X	\$ 5,309,952		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 101,490,250		\$ 99,018,310		\$ 84,490,814	

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: SC**

	FY 2001		FY 2002		FY 2003	
<b>I. Federal-State MCH Block Grant Partnership</b>	<b>BUDGETED</b>	<b>EXPENDED</b>	<b>BUDGETED</b>	<b>EXPENDED</b>	<b>BUDGETED</b>	<b>EXPENDED</b>
a. Pregnant Women	\$ 6,107,306	\$ 8,886,123	\$ 7,086,743	\$ 8,494,954	\$ 9,128,917	\$ 2,293,340
b. Infants < 1 year old	\$ 5,789,565	\$ 3,119,685	\$ 5,365,593	\$ 2,982,356	\$ 5,153,518	\$ 2,953,071
c. Children 1 to 22 years old	\$ 18,213,606	\$ 17,678,218	\$ 16,879,599	\$ 16,900,019	\$ 16,212,644	\$ 16,734,070
d. Children with Special Healthcare Needs	\$ 23,551,472	\$ 13,072,457	\$ 20,430,207	\$ 12,497,002	\$ 13,429,634	\$ 18,353,230
e. Others	\$ 23,870,613	\$ 30,577,783	\$ 23,947,312	\$ 29,231,740	\$ 31,413,255	\$ 30,867,028
f. Administration	\$ 860,649	\$ 844,789	\$ 747,329	\$ 891,961	\$ 861,684	\$ 908,225
g. SUBTOTAL	\$ 78,393,211	\$ 74,179,055	\$ 74,456,783	\$ 70,998,032	\$ 76,199,652	\$ 72,108,964
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 95,000		\$ 100,000		\$ 90,300	
c. CISS	\$ 72,500		\$ 100,000		\$ 100,000	
d. Abstinence Education	\$ 811,757		\$ 811,757		\$ 811,757	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 75,485,843		\$ 74,674,113		\$ 77,455,623	
h. AIDS	\$ 460,340		\$ 621,742		\$ 500,340	
i. CDC	\$ 931,808		\$ 710,031		\$ 1,010,279	
j. Education	\$ 4,638,845		\$ 4,752,400		\$ 4,939,410	
k. Other						
Dept Transportation	\$ 0		\$ 0		\$ 56,002	
Title X	\$ 4,600,763		\$ 4,634,174		\$ 4,897,468	
Univ Newborn Hearing	\$ 0		\$ 0		\$ 123,256	
Public Safety	\$ 0		\$ 311,800		\$ 0	
Strength Comp School Hlth	\$ 0		\$ 78,440		\$ 0	
Unic Newborn Hearing	\$ 0		\$ 110,000		\$ 0	
SC Dept. of Public Safety	\$ 173,800		\$ 0		\$ 0	
University of SC	\$ 28,284		\$ 0		\$ 0	
III. SUBTOTAL	\$ 87,298,940		\$ 86,904,457		\$ 89,984,435	

## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

- 1. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Variation is the result of MCH workgroup reviewing and updating pyramid categories.
- 2. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Bureau and Agency have transitioned most prenatal care to the private OB providers, only 1 county continues to provide prenatal care. All regions and most counties continue to provide prenatal risk sssessments, referrals to OB providers, followup care, and family support services to prenataals.  
  
Thefore, more expenses are incurred providing services to infants, children, and children with special health care needs than in previous years.
- 3. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Variation is the result of MCH workgroup reviewing and updating pyramid categories.
- 4. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Bureau and Agency have transitioned most prenatal care to the private OB providers, only 1 county continues to provide prenatal care. All regions and most counties continue to provide prenatal risk sssessments, referrals to OB providers, followup care, and family support services to prenataals.  
  
Thefore, more expenses are incurred providing services to infants, children, and children with special health care needs than in previous years.
- 5. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Bureau and Agency have transitioned most prenatal care to the private OB providers, only 1 county continues to provide prenatal care. All regions and most counties continue to provide prenatal risk sssessments, referrals to OB providers, followup care, and family support services to prenataals.  
  
Thefore, more expenses are incurred providing services to infants, children, and children with special health care needs than in previous years.
- 6. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Variation is the result of MCH workgroup reviewing and updating pyramid categories.
- 7. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Bureau and Agency have transitioned most prenatal care to the private OB providers, only 1 county continues to provide prenatal care. All regions and most counties continue to provide prenatal risk sssessments, referrals to OB providers, followup care, and family support services to prenataals.  
  
Thefore, more expenses are incurred providing services to infants, children, and children with special health care needs than in previous years.
- 8. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Bureau and Agency have transitioned most prenatal care to the private OB providers, only 1 county continues to provide prenatal care. All regions and most counties continue to provide prenatal risk sssessments, referrals to OB providers, followup care, and family support services to prenataals.  
  
Thefore, more expenses are incurred providing services to infants, children, and children with special health care needs than in previous years.
- 9. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminBudgeted  
**Row Name:** Administration  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
There is a significant increase in the budget from FY05 to FY06. It appears that the figure in the budget for FY05 was based only on projected administrative costs for the federal MCH Block Grant funds. The budget for FY06 is based on a combination of all of the fund combinations in the Federal-State MCH Block Grant Partnership section.
- 10. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended

**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2004

**Field Note:**  
The Bureau and Agency have transitioned most prenatal care to the private OB providers, only 1 county continues to provide prenatal care. All regions and most counties continue to provide prenatal risk ssessments, referrals to OB providers, followup care, and family support services to prenatals.

Thefore, more expenses are incurred providing services to infants, children, and children with special health care needs than in previous years.

There is a significant difference between the budget and expenditures. It appears that the figure in the budget was based only on projected administrative costs for the federal MCH Block Grant funds. The expenditures are based on a combination of all of the fund combinations in the Federal-State MCH Block Grant Partnership section.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: SC**

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 52,542,555	\$ 10,986,843	\$ 14,818,149	\$ 0	\$ 11,331,053	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 22,168,438	\$ 42,682,120	\$ 63,169,575	\$ 0	\$ 44,019,318	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,375,803	\$ 385,494	\$ 432,998	\$ 0	\$ 397,571	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,806,213	\$ 219,522	\$ 1,764,065	\$ 0	\$ 226,399	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 81,893,009	\$ 54,273,979	\$ 80,184,787	\$ 0	\$ 55,974,341	\$ 0

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: SC**

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 39,094,694	\$ 48,950,758	\$ 38,054,862	\$ 45,552,337	\$ 50,284,150	\$ 13,325,737
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 34,720,353	\$ 17,847,481	\$ 31,525,002	\$ 19,219,167	\$ 18,333,636	\$ 56,807,442
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,426,756	\$ 1,268,462	\$ 766,905	\$ 1,192,767	\$ 1,303,014	\$ 389,388
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 3,151,408	\$ 6,112,354	\$ 4,110,014	\$ 5,033,761	\$ 6,278,852	\$ 1,586,397
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 78,393,211	\$ 74,179,055	\$ 74,456,783	\$ 70,998,032	\$ 76,199,652	\$ 72,108,964

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

- 1. Section Number:** Main  
**Field Name:** DirectHCBudgeted  
**Row Name:** Direct Health Care Services  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.  
During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.
- 2. Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Variation is the result of MCH workgroup reviewing and updating pyramid categories.
- 3. Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.  
During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.
- 4. Section Number:** Main  
**Field Name:** EnablingBudgeted  
**Row Name:** Enabling Services  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.  
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There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.
- 5. Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Variation is the result of MCH workgroup reviewing and updating pyramid categories.
- 6. Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.  
During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.
- 7. Section Number:** Main  
**Field Name:** PopBasedBudgeted  
**Row Name:** Population-Based Services  
**Column Name:** Budgeted  
**Year:** 2006

**Field Note:**

The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.

During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.

**8. Section Number:** Main

**Field Name:** PopBasedExpended

**Row Name:** Population-Based Services

**Column Name:** Expended

**Year:** 2003

**Field Note:**

Variation is the result of MCH workgroup reviewing and updating pyramid categories.

**9. Section Number:** Main

**Field Name:** PopBasedExpended

**Row Name:** Population-Based Services

**Column Name:** Expended

**Year:** 2004

**Field Note:**

The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.

During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.

**10. Section Number:** Main

**Field Name:** InfrastrBuildBudgeted

**Row Name:** Infrastructure Building Services

**Column Name:** Budgeted

**Year:** 2006

**Field Note:**

The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.

During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.

**11. Section Number:** Main

**Field Name:** InfrastrBuildExpended

**Row Name:** Infrastructure Building Services

**Column Name:** Expended

**Year:** 2003

**Field Note:**

Variation is the result of MCH workgroup reviewing and updating pyramid categories.

**12. Section Number:** Main

**Field Name:** InfrastrBuildExpended

**Row Name:** Infrastructure Building Services

**Column Name:** Expended

**Year:** 2004

**Field Note:**

The Agency uses the Personnel Cost Accounting System (PCAS) to document personnel expenses. In 2003, MCH staff reviewed all PCAS codes and realigned with the levels of the MCH pyramid.

The Bureau and the Agency continues to work toward devoting more resources, effort and expenses to moving down the MCH pyramid to enabling, population based and infrastructure activities and interventions.

During the past few years of decreasing budgets, this has been and continues to be a challenge.

There has also been a tremendous increase in the amount of enabling services provided through family support services since 2004.

Due to the above activities, shifts in expenses by the pyramid levels have occurred in the past few years.



<b>FORM 6</b>						
<b>NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED</b>						
<small>Sect. 506(a)(2)(B)(iii)</small>						
<b>STATE: SC</b>						
Total Births by Occurrence: <u>53,376</u>					Reporting Year: 2003	
Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	52,842	99	36	3	3	100
Congenital Hypothyroidism	52,842	99	1,842	30	30	100
Galactosemia	52,842	99	356	1	1	100
Sickle Cell Disease	52,842	99	58	53	53	100
<b>Other Screening (Specify)</b>						
Sickle Cell Trait	52,842	99	1,619	0	0	
Congenital Adrenal Hyperplasia (CAH)	52,842	99	354	4	4	100
Medium Chain AcylCo-A Dehydrogenase (MCAD)	52,842	99	76	3	3	100
<b>Screening Programs for Older Children &amp; Women (Specify Tests by name)</b>						
(1) Use occurrent births as denominator.						
(2) Report only those from resident births.						
(3) Use number of confirmed cases as denominator.						

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1.

Section Number:

Other Screening Types

Field Name:

Other

Row Name:

All Rows

Column Name:

All Columns

Year:

2006

Field Note:

the value "0" in column "C" and "D" for Cickle Cell Trait should be read as "Not available"

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: SC**

**Reporting Year: 2004**

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	17,668	100.0				
Infants < 1 year old	27,637	77.0				23.0
Children 1 to 22 years old	122,911	60.0				40.0
Children with Special Healthcare Needs	13,438	84.8		2.5		12.7
Others	107,451	59.0				41.0
<b>TOTAL</b>	<b>289,105</b>					

**FORM NOTES FOR FORM 7**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Main  
**Field Name:** Children\_0\_1\_TS  
**Row Name:** Infants <1 year of age  
**Column Name:** Title V Total Served  
**Year:** 2006  
**Field Note:**  
Programmatic data

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: SC**

Reporting Year: 2004

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	53,312	30,918	17,538	175	831	5	282	3,563
Title V Served	17,668	8,657	8,746	265				
Eligible for Title XIX	27,405	11,809	12,511	61				3,024
<b>INFANTS</b>								
Total Infants in State	56,452	34,663	19,727	140	594	41	1,287	
Title V Served	27,637	11,745	13,818	47	166	36		1,825
Eligible for Title XIX	35,238	14,490	16,025	56				4,667

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	48,406	4,247	659	2,936	31	242		1,038
Title V Served	15,901	1,767						
Eligible for Title XIX	27,405	2,361	25,044	1,427	2	62		870
<b>INFANTS</b>								
Total Infants in State	53,833	2,619						
Title V Served	24,873	2,764						
Eligible for Title XIX	35,238	3,128	32,110	1,634	6	67		1,421

## FORM NOTES FOR FORM 8

None

### FIELD LEVEL NOTES

- 1. Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_All  
**Row Name:** Total Deliveries in State  
**Column Name:** Total All Races  
**Year:** 2006  
**Field Note:**  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.  
(Occurrence data for SC) Data source: Div. of Biostatistics
- 2. Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_White  
**Row Name:** Total Deliveries in State  
**Column Name:** White  
**Year:** 2006  
**Field Note:**  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.  
(Occurrence data for SC) Data source: Div. of Biostatistics
- 3. Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Black  
**Row Name:** Total Deliveries in State  
**Column Name:** Black or African American  
**Year:** 2006  
**Field Note:**  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.  
(Occurrence data for SC) Data source: Div. of Biostatistics
- 4. Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Indian  
**Row Name:** Total Deliveries in State  
**Column Name:** American Indian or Native American  
**Year:** 2006  
**Field Note:**  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.  
(Occurrence data for SC) Data source: Div. of Biostatistics
- 5. Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Asian  
**Row Name:** Total Deliveries in State  
**Column Name:** Asian  
**Year:** 2006  
**Field Note:**  
This category includes "Other pacific Islander" because in VR database the race category is "Asian and Other Pacific Islander"  
(Occurrence data for SC) Data source: Div. of Biostatistics  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.
- 6. Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_RaceOther  
**Row Name:** Total Deliveries in State  
**Column Name:** Other and Unknown  
**Year:** 2006  
**Field Note:**  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.
- 7. Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_All  
**Row Name:** Total Infants in State  
**Column Name:** Total All Races  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution.
- 8. Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_White  
**Row Name:** Total Infants in State  
**Column Name:** White  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution.
- 9. Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_Black  
**Row Name:** Total Infants in State  
**Column Name:** Black or African American  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution..
- 10. Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_Indian  
**Row Name:** Total Infants in State  
**Column Name:** American Indian or Native American  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution.

11. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_Asian  
**Row Name:** Total Infants in State  
**Column Name:** Asian  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution.
12. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_Hawaiian  
**Row Name:** Total Infants in State  
**Column Name:** Native Hawaiian or Other Pacific Islander  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution.
13. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_More  
**Row Name:** Total Infants in State  
**Column Name:** More Than One Race Reported  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race distribution.
14. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTitleXIX\_Asian  
**Row Name:** Eligible for Title XIX  
**Column Name:** Asian  
**Year:** 2006  
**Field Note:**  
Not available
15. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTitleXIX\_Hawaiian  
**Row Name:** Eligible for Title XIX  
**Column Name:** Native Hawaiian or Other Pacific Islander  
**Year:** 2006  
**Field Note:**  
Not available
16. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** InfantsTitleXIX\_More  
**Row Name:** Eligible for Title XIX  
**Column Name:** More Than One Race Reported  
**Year:** 2006  
**Field Note:**  
Not available
17. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_TotalNotHispanic  
**Row Name:** Total Deliveries in State  
**Column Name:** Total Not Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
The data for 2004 is to be considered provisional (estimates). Pending Birth data file to be completed.  
Occurance data/Div of Biostat.
18. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_TotalHispanic  
**Row Name:** Title V Served  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for sub-categories.
19. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_NotReported  
**Row Name:** Title V Served  
**Column Name:** Ethnicity Not Reported  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for these sub-categories.
20. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_Mexican  
**Row Name:** Title V Served  
**Column Name:** Mexican  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for these sub-categories.
21. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_Cuban  
**Row Name:** Title V Served  
**Column Name:** Cuban  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for these sub-categories.

22. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_PuertoRican  
**Row Name:** Title V Served  
**Column Name:** Puerto Rican  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for these sub-categories.
23. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_CentralAmerican  
**Row Name:** Title V Served  
**Column Name:** Central and South American  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for these sub-categories.
24. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleV\_EthnicityOther  
**Row Name:** Title V Served  
**Column Name:** Other and Unknown  
**Year:** 2006  
**Field Note:**  
Programmatic data. Data is for FY2004.  
Data is not available for these sub-categories.
25. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_TotalNotHispanic  
**Row Name:** Total Infants in State  
**Column Name:** Total Not Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race /ethnicity distribution.
26. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_TotalHispanic  
**Row Name:** Total Infants in State  
**Column Name:** Total Hispanic or Latino  
**Year:** 2006  
**Field Note:**  
Data is not available in subcategories. The numbers are estimates as of July 1, 2004, provided by ORS.  
The race breakdown is done by Div. of Biost. using the 2003 race /ethnicity distribution.
27. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_NotReported  
**Row Name:** Total Infants in State  
**Column Name:** Ethnicity Not Reported  
**Year:** 2006  
**Field Note:**  
Not available
28. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_Mexican  
**Row Name:** Total Infants in State  
**Column Name:** Mexican  
**Year:** 2006  
**Field Note:**  
Not available in this sub-category
29. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_Cuban  
**Row Name:** Total Infants in State  
**Column Name:** Cuban  
**Year:** 2006  
**Field Note:**  
Not available in this sub-category
30. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_PuertoRican  
**Row Name:** Total Infants in State  
**Column Name:** Puerto Rican  
**Year:** 2006  
**Field Note:**  
Not available in this sub-category
31. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_CentralAmerican  
**Row Name:** Total Infants in State  
**Column Name:** Central and South American  
**Year:** 2006  
**Field Note:**  
Not available in this sub-category
32. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTotal\_EthnicityOther  
**Row Name:** Total Infants in State  
**Column Name:** Other and Unknown  
**Year:** 2006  
**Field Note:**  
Not available in this sub-category
33. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** InfantsTitleV\_TotalHispanic  
**Row Name:** Title V Served



**Column Name:** Total Hispanic or Latino

**Year:** 2006

**Field Note:**

Data is not available in subcategories

**34. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_NotReported

**Row Name:** Title V Served

**Column Name:** Ethnicity Not Reported

**Year:** 2006

**Field Note:**

Programmatic data. Data is for FY2004.

Data is not available for these sub-categories.

**35. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_Mexican

**Row Name:** Title V Served

**Column Name:** Mexican

**Year:** 2006

**Field Note:**

Programmatic data. Data is for FY2004.

Data is not available for these sub-categories.

**36. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_Cuban

**Row Name:** Title V Served

**Column Name:** Cuban

**Year:** 2006

**Field Note:**

Programmatic data. Data is for FY2004.

Data is not available for these sub-categories.

**37. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_PuertoRican

**Row Name:** Title V Served

**Column Name:** Puerto Rican

**Year:** 2006

**Field Note:**

Programmatic data. Data is for FY2004.

Data is not available for these sub-categories.

**38. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_CentralAmerican

**Row Name:** Title V Served

**Column Name:** Central and South American

**Year:** 2006

**Field Note:**

Programmatic data. Data is for FY2004.

Data is not available for these sub-categories.

**39. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_EthnicityOther

**Row Name:** Title V Served

**Column Name:** Other and Unknown

**Year:** 2006

**Field Note:**

Programmatic data. Data is for FY2004.

Data is not available for these sub-categories.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: SC**

	<b>FY 2006</b>	<b>FY 2005</b>	<b>FY 2004</b>	<b>FY 2003</b>	<b>FY 2002</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 868-0404</u>	<u>(800) 868-0404</u>	<u>(800) 868-0404</u>	<u>(800) 868-0404</u>	<u>(800) 868-0404</u>
2. State MCH Toll-Free "Hotline" Name	The Careline	The Careline	The Careline	The Careline	The Careline
3. Name of Contact Person for State MCH "Hotline"	<u>Kathy Swanson</u>	<u>Kathy Swanson</u>	<u>Kathy Swanson</u>	<u>Kathy Swanson</u>	<u>Kathy Swanson</u>
4. Contact Person's Telephone Number	<u>(803) 898-0743</u>	<u>(803)898 - 0743</u>	<u>(803)898 - 0743</u>	<u>(803) 898-0743</u>	<u>(803) 898-0743</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>		<u>15,775</u>	<u>17,214</u>	<u>16,355</u>

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: SC**

	<b>FY 2006</b>	<b>FY 2005</b>	<b>FY 2004</b>	<b>FY 2003</b>	<b>FY 2002</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
4. Contact Person's Telephone Number	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

<b>FORM NOTES FOR FORM 9</b>
None
<b>FIELD LEVEL NOTES</b>
None

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2006**  
[SEC. 506(A)(1)]  
**STATE: SC**

1. State MCH Administration:  
(max 2500 characters)

The SC Title V MCH Block Grant is coordinated through the Bureau of Maternal and Child Health, Health Services, Department of Health and Environmental Control (DHEC). The Bureau provides the leadership and coordination of the overall MCH activities in DHEC. Other programs within the administrative control of the Bureau include WIC Family Planning, and the Individuals with Disabilities Act (IDEA)/BabyNet for children 0-3 years old. Roles of the Title V program include developing policies, plans, and programs to improve the health of women, infants, children, children with special health care needs, adolescents and families in SC.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 11,900,111
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 11,729,452
5. Local MCH Funds (Line 4, Form 2)	\$ 11,398,236
6. Other Funds (Line 5, Form 2)	\$ 769,931
7. Program Income (Line 6, Form 2)	\$ 20,176,611
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 55,974,341</b>

9. Most significant providers receiving MCH funds:

Palmetto Richland Memorial Hospital
Greenville Hospital System
Medical University of South Carolina
University of South Carolina

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	17,668
b. Infants < 1 year old	27,637
c. Children 1 to 22 years old	122,911
d. CSHCN	13,438
e. Others	107,451

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Partnership efforts to promote medical homes for all children have been ongoing since 1991. In these partnerships, the Medical Home provides the medical care and the public health department staff provide services that are needed to enhance and augment the medical home. All partnerships are designed to fit the needs of the local community. Pediatric sub-specialist Partnerships: Thirty partnerships with pediatric sub-specialists have been developed throughout the state that are patterned after an earlier successful model with Shriners Hospital. Palmetto Children's Clinic: A project between CSHCN and Richland Memorial Hospital that provides a medical home for children with special needs. Outcomes include increased Medicaid visits and immunization rates, and decreased hospitalizations.

b. Population-Based Services:  
(max 2500 characters)

Childhood Lead Poisoning Prevention: A statewide lead advisory committee provides direction for targeting program efforts and Central Office staff provide technical assistance to local health departments and the community relative to lead screening and awareness. Newborn Screening, Tracking, and Follow-up: During 2004, the state implemented an expanded panel and computer system for metabolic screening. Therefore, starting with CY 2006 births, we expect to link metabolic screening data with birth certificates. All 48 birthing hospitals are screening more than 98% of infants for hearing loss. Women & Children's Services maintains a statewide registry of patients with congenital metabolic disorders, monitors laboratory tests, makes recommendations for follow-up, and refers clients to CSHCN to determine genetic testing and treatment eligibility.

c. Infrastructure Building Services:  
(max 2500 characters)

Oral Health: Through partnerships, this Division has developed a statewide plan, conducted a public awareness campaign, increased Medicaid providers, and conducted a cost effective oral health needs assessment of public school children. The Division has established a comprehensive integrated statewide oral health plan and surveillance system, provided grant support for replacement of defective fluoridation equipment, and is conducting grassroots community meetings to identify community specific oral health improvement plans.

12. The primary Title V Program contact person:

Name	Dr. Harvey Kayman
Title	MCH Bureau Director
Address	1751 Calhoun Street
City	Columbia
State	SC

13. The children with special health care needs (CSHCN) contact person:

Name	Cheryl Waller, RN,
Title	CSHCN Division Director
Address	1751 Calhoun Street
City	Columbia
State	SC

Zip	29201-2606
Phone	803-898-3780
Fax	803-898-2065
Email	kaymanh@dhec.sc.gov
Web	

Zip	29201-2606
Phone	803-898-0789
Fax	803-898-0618
Email	wallercj@dhec.sc.gov
Web	

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: SC**

**PERFORMANCE MEASURE # 01**

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	99	99	99	99	99
Annual Indicator	99.0	99.0	99.0	99.0	
Numerator	53,026	52,723	51,640	52,842	
Denominator	53,562	53,255	52,162	53,376	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	99	99	99	99	99
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		65	65	65	85
Annual Indicator		61.2	24.8	83.6	74.1
Numerator		336	204	905	630
Denominator		549	821	1,082	850
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	65	65	70	70	75
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	92	94	95	95	95
Annual Indicator	96.3	88.2	88.2	83.5	83.5
Numerator	234	94,632	94,632	710	710
Denominator	243	107,326	107,326	850	850
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	55	55	60	60	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	92	93	94	95	90
Annual Indicator	92.0	92.0	91.3	88.0	91.4
Numerator	10,961	10,963	10,626	9,636	12,286
Denominator	11,914	11,918	11,633	10,944	13,438
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	60	60	65	65	70
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.



**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	<u>                    </u>	<u>                    75</u>	<u>                    75</u>	<u>                    80</u>	<u>                    80</u>
Annual Indicator	<u>                    </u>	<u>                    73.8</u>	<u>                    72.1</u>	<u>                    76.5</u>	<u>                    76.5</u>
Numerator	<u>                    </u>	<u>                    336</u>	<u>                    592</u>	<u>                    828</u>	<u>                    828</u>
Denominator	<u>                    </u>	<u>                    455</u>	<u>                    821</u>	<u>                    1,082</u>	<u>                    1,082</u>
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>                    75</u>	<u>                    80</u>	<u>                    80</u>	<u>                    85</u>	<u>                    85</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	<u>                    </u>	<u>                    11</u>	<u>                    20</u>	<u>                    25</u>	<u>                    30</u>
Annual Indicator	<u>                    </u>	<u>                    7.1</u>	<u>                    5.8</u>	<u>                    90.0</u>	<u>                    90.0</u>
Numerator	<u>                    </u>	<u>                    101</u>	<u>                    32</u>	<u>                    974</u>	<u>                    974</u>
Denominator	<u>                    </u>	<u>                    1,423</u>	<u>                    548</u>	<u>                    1,082</u>	<u>                    1,082</u>
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>                    7</u>	<u>                    7</u>	<u>                    10</u>	<u>                    10</u>	<u>                    10</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<b>Annual Objective and Performance Data</b>					
	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>
<b>Annual Performance Objective</b>	<u>90</u>	<u>90</u>	<u>90</u>	<u>90</u>	<u>90</u>
<b>Annual Indicator</b>	<u>87.7</u>	<u>87.1</u>	<u>83.3</u>	<u>84.3</u>	<u>80.5</u>
<b>Numerator</b>	<u>92,850</u>	<u>93,375</u>	<u>88,798</u>	<u>93,449</u>	<u>90,088</u>
<b>Denominator</b>	<u>105,872</u>	<u>107,205</u>	<u>106,600</u>	<u>110,852</u>	<u>111,910</u>
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

<b>Annual Objective and Performance Data</b>					
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Performance Objective</b>	<u>85</u>	<u>90</u>	<u>90</u>	<u>90</u>	<u>90</u>
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<b>Annual Objective and Performance Data</b>					
	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>
<b>Annual Performance Objective</b>	<u>36</u>	<u>34.4</u>	<u>28</u>	<u>27</u>	<u>26</u>
<b>Annual Indicator</b>	<u>33.6</u>	<u>29.9</u>	<u>28.7</u>	<u>28.8</u>	<u>28.1</u>
<b>Numerator</b>	<u>2,915</u>	<u>2,625</u>	<u>2,379</u>	<u>2,435</u>	<u>2,424</u>
<b>Denominator</b>	<u>86,750</u>	<u>87,802</u>	<u>83,016</u>	<u>84,494</u>	<u>86,262</u>
<b>Is the Data Provisional or Final?</b>				Final	Provisional

<b>Annual Objective and Performance Data</b>					
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Performance Objective</b>	<u>26</u>	<u>26</u>	<u>25</u>	<u>25</u>	<u>24</u>
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	45	45	45	25	30
Annual Indicator	10.6	13.9	19.6	27.4	31.8
Numerator	6,252	9,026	2,134	3,518	11,627
Denominator	58,872	64,739	10,870	12,856	36,620
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	35	40	45	50	50
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	7.4	7.4	6.5	6.5	6.5
Annual Indicator	6.6	6.3	6.9	4.3	3.7
Numerator	52	50	52	34	29
Denominator	787,470	797,316	758,725	794,631	791,323
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	3.6	3.6	3.6	3.5	3.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 11**

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	37	35	50	50	50
Annual Indicator	48.2	52.7	53.8	56.3	56.3
Numerator	23,164	25,522	25,878	30,050	30,511
Denominator	48,089	48,429	48,100	53,376	54,219
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	60	60	65	65	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	60	77	98	99	100
Annual Indicator	41.2	95.0	98.4	98.1	98.4
Numerator	23,299	37,042	49,210	50,516	52,376
Denominator	56,563	38,990	50,010	51,488	53,216
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	13	12.3	12	10	10
Annual Indicator	12.7	9.9	6.9	9.0	
Numerator	128,000	101,000	69,000	92,000	
Denominator	1,009,641	1,016,000	998,000	1,027,000	
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	8	8	8	7	7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 14**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	88	96	85	85	85
Annual Indicator	87.3	83.0	83.6	85.4	
Numerator	306,616	343,105	349,503	328,027	
Denominator	351,362	413,153	418,000	384,000	
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	87	87	90	90	95
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 15**

The percent of very low birth weight infants among all live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	1.9	1.9	1.8	1.7	1.7
Annual Indicator	2.0	1.9	1.9	2.1	2.1
Numerator	1,107	1,056	1,055	1,157	1,113
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2	2	1.8	1.8	1.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	7.8	7.3	6	6	6
Annual Indicator	6.1	6.0	6.3	5.5	7.8
Numerator	18	18	18	16	23
Denominator	295,380	298,977	283,834	288,841	293,851
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	6	6	6	6	5.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	78	77.5	78	78.5	82
Annual Indicator	77.1	77.1	80.0	77.3	77.7
Numerator	800	755	793	849	881
Denominator	1,037	979	991	1,098	1,134
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	80	82	84	84	86
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	82.8	80	81	80	82
Annual Indicator	78.6	78.5	77.7	76.2	67.4
Numerator	43,982	43,739	42,290	42,248	36,172
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	70	74	76	80	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 1**

The percentage of Medicaid newborns in the state receiving a home visit.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	72	67	68	70	60
Annual Indicator	58.0	60.4	53.0	50.8	46.0
Numerator	14,313	14,092	13,865	13,323	12,900
Denominator	24,671	23,349	26,150	26,210	28,032
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	50	55	60	60	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 2**

Percent of women giving birth in the state whose pregnancy was unintended

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	44	44	45	45	45
Annual Indicator	47.3	48.2	47.5	NaN	NaN
Numerator	23,731	24,339	23,071	0	0
Denominator	50,209	50,496	48,570	0	0
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	45	45	45	45	45
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.



**STATE PERFORMANCE MEASURE # 3**

The number of school districts that are designated as Title V Providers. (Revised 2004)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective			70	76	80
Annual Indicator			65.9	77.6	64.7
Numerator			56	66	55
Denominator			85	85	85
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	65	65	70	75	75
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 4**

The state has a childhood injury prevention program in place

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	100	100	100	100	100
Annual Indicator	53.8	53.8	69.2	91.7	87.5
Numerator	7	7	9	11	7
Denominator	13	13	13	12	8
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 6**

Percent of adolescents who smoke

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	34	32	27	27	27
Annual Indicator	36.0	27.6	0.0	25.8	NaN
Numerator	1,555	858	0	894	0
Denominator	4,319	3,106	1	3,466	0
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	27	27	27	27	27
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 7**

To implement in at least three health districts the comprehensive risk assessment form for prenats presenting to the health department for services. (Revised 2004)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective				30.1	75
Annual Indicator			7.7	33.3	100.0
Numerator			1	4	11
Denominator			13	12	11
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 9**

Maintain continuation rates for DHEC Family Planning clients to at least 85 percent. (Revised 2004)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	50	50	85	85	88
Annual Indicator	37.0	50.0	87.7	86.3	86.7
Numerator	17	23	72,163	71,346	66,781
Denominator	46	46	82,306	82,702	77,051
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	88	90	90	90	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 11

None

### FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data is not available for 2002.  
These numbers are estimates; NBS can not match up with VR.
2. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data is not available for 2004.  
These numbers are estimates; NBS can not match up with VR.
3. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data is not available for 2004.  
These numbers are estimates; NBS can not match up with VR.
4. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.  
The values "1" for annual objective to be considered not available.
5. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2003 is Programmatic data from Record reviews.
6. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data source : Lisa Vousburgh CSHCN : Record reviews  
  
SLAITS data will be used in future years, therefore, future objectives have been adjusted to reflect the use of SLAITS data.
7. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.  
CRS Programmatic data.
8. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2003,2004 is provisional  
Source: Lisa Vousburg : CQI resord review . Dta from National SLAIT survey for 2003, 2004 is not available.
9. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2003,2004 is provisional  
Source: Lisa Vousburgh : CQI resord review .  
  
SLAITS data will be used in future years, therefore, future objectives have been adjusted to reflect the use of SLAITS data.
10. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.

CRS Programmatic data.

11. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2003 is Programmatic data from Record reviews.
12. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
SLAITS data will be used in future years, therefore, future objectives have been adjusted to reflect the use of SLAITS data.
13. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
14. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2003 is Programmatic data from Record reviews.
15. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2003 was also used for 2004.  
  
SLAITS data will be used in future years, therefore, future objectives have been adjusted to reflect the use of SLAITS data.
16. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.
17. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2003 is Programmatic data from Record reviews.
18. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2003 was used for 2004.  
  
SLAITS data will be used in future years, therefore, future objectives have been adjusted to reflect the use of SLAITS data.
19. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data from 2002 SC state survey ( 73% )provided by Imm Dept. is provisional, pending review. The number provided for 2002,2003 and 2004 should be considered estimates as they are from NIS ( CDC web-reports). Numerators and denominators are estimates provided by ORC census data. Data is for the period Q3,2002-Q2,2003
20. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data from SC state survey ( 73% )provided by Imm Dept. is provisional, pending review. The number provided for 2002,2003 and 2004 should be considered estimates as they are from NIS ( CDC web-reports). Numerators and denominators are estimates provided by ORC census data. Data is for the period Q1,2003-Q4,2003
21. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data from 2002 SC state survey ( 73% )provided by Imm Dept. is provisional, pending review. The number provided for 2002,2003 and 2004 should be considered

estimates as they are from NIS ( CDC web-reports). Numerators and denominators are estimates provided by ORC census data. Data is for the period Q3,2003-Q2,2004 and this is the most recent data available.

22. **Section Number:** Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The provided numbers should be considered estimates. Pending 2004 dataset to be completed; Population est. as of July, 2004 are used and 2003 distribution of gender is applied for the calculations.
23. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The source of performance data for this measure changed in 2000. Prior to 2000, the performance data was an estimate based on public school enrollment and a survey of dentists. This method resulted in a very inaccurate performance estimate. Starting In 2000, the Oral Health Division began conducting a survey of the oral health status of public school children, which resulted in performance data that is more accurate.
24. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The provider of the data (Oral Health) cautions that the numbers for 2003 can be biased, because the data is from school based programs for sealants.
25. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provisional data. The provider of the data (Oral Health) cautions that the numbers for 2004 can be biased, because the data is from school based programs for sealants and may include some 7-th graders.
26. **Section Number:** Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
This measure is for age group 1-14.
27. **Section Number:** Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Provided numbers to be considered estimates. Pending 2004 Death file to be completed. Population data are estimates as of July, 2004.
28. **Section Number:** Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
29. **Section Number:** Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data provided is provisional. Birth dataset had included new variable " BREASTFED" : if babies were breastfed at the hospital, beginning from 2004. There is no data for 2003 available from PRAMS and the percentage for 2003 is an estimation using as denominator the occurrent live births for 2003.
30. **Section Number:** Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data provided is provisional (Pending completion of 2004 Birth file). Birth dataset had included new variable " BREASTFED" : if babies were breastfed at the hospital, beginning from 2004. Numerator: Number of moms, who breast-fed their babies; the denominator : Number of occurrent live births.
31. **Section Number:** Performance Measure #13  
**Field Name:** PM13  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
32. **Section Number:** Performance Measure #13  
**Field Name:** PM13  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data is provided from Census Bureau, CPS . Numbers are estimated.

Data for 2003 is not available.

33. **Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data for 2004 is not available yet.

34. **Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Data not available for 2002.

35. **Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

The number in the numerator excludes those children who were SCHIP eligible at any point in State Fiscal Year 2002. Denominator is for CY2003 children (<19) at or below 200% poverty, and numerator is for FY 2003.

Data for 2004 is not available.

36. **Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The number in the numerator excludes those children who were SCHIP eligible at any point in State Fiscal Year 2002

Data for 2004 is not available.

37. **Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

38. **Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data provided for 2004 is to be considered estimation, Pending 2004 dataset to be completed. Residence data.

39. **Section Number:** Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Data not available for 2002.

40. **Section Number:** Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Data for 2004 is not available yet

41. **Section Number:** Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Numbers for 2004 are to be considered estimates. Pending 2004 Death file to be completed. Residence data

42. **Section Number:** Performance Measure #17

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data provided for 2004 is to be considered estimation, Pending 2004 dataset to be completed.Occurrence data.

43. **Section Number:** Performance Measure #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data provided for 2004 is to be considered estimation, Pending 2004 dataset to be completed.Residence data.

44. **Section Number:** State Performance Measure #1

**Field Name:** SM1

**Row Name:**

- Column Name:**  
**Year:** 2002  
**Field Note:**  
The data is not available for 2002.
45. **Section Number:** State Performance Measure #1  
**Field Name:** SM1  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data provided by Medicaid
46. **Section Number:** State Performance Measure #1  
**Field Name:** SM1  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data provided from Heather Kirby(ORS):  
The numbers are calculated as follows:  
They pulled all Medicaid paid  
births from the Medicaid paid inpatient hospital claims and linked these  
babies (not matched to South Carolina birth certificates) to the  
Medicaid paid newborn home visits.
47. **Section Number:** State Performance Measure #2  
**Field Name:** SM2  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data for 2003 and 2004 is not available yet.
48. **Section Number:** State Performance Measure #2  
**Field Name:** SM2  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data source: PRAMS. Data for 2003 and 2004 is not available  
The values of "0" and "1" are used only to be able to save the form.
49. **Section Number:** State Performance Measure #2  
**Field Name:** SM2  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data is not available yet.
50. **Section Number:** State Performance Measure #3  
**Field Name:** SM3  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data is not available for 2002.
51. **Section Number:** State Performance Measure #4  
**Field Name:** SM4  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data for 2002 is not available.
52. **Section Number:** State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data for 2002 is not available.
53. **Section Number:** State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The 2003 YRBS did not achieve generalized results and thus describes only the sample population. Comparison with the results from previous years should be applied with caution.
54. **Section Number:** State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
No available data for 2004
55. **Section Number:** State Performance Measure #7  
**Field Name:** SM7  
**Row Name:**  
**Column Name:**



**Year:** 2004  
**Field Note:**  
During 2004, the number of health districts was reduced to 11 from 12. In 2005, the districts will be reorganized again into 8 regions.

**56. Section Number:** State Performance Measure #9  
**Field Name:** SM9  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Programmatic data.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]  
**STATE: SC**

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	9.5	7.1	7	8	8
Annual Indicator	8.7	8.9	9.3	8.3	8.9
Numerator	488	496	507	463	480
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	8	8	7	7	7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.3	2.5	2.5	2.6	2.6
Annual Indicator	2.6	2.6	2.7	2.3	2.0
Numerator	14.2	14.9	15.9	13.6	14
Denominator	5.5	5.8	5.9	5.9	7
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	1.9	1.9	1.8	1.8	1.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	6.8	6.5	6.4	6.4	6.4
Annual Indicator	6.1	6.0	6.4	5.9	6.1
Numerator	340	337	346	328	329
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	6	6	5.9	5.9	5.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	2.8	2.5	2.5	2.4	2.3
Annual Indicator	2.6	2.9	3.0	2.4	2.8
Numerator	148	159	161	135	151
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.2	2.1	2	2	2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	15	14.1	13.8	9.1	9.1
Annual Indicator	8.8	8.8	9.1	8.5	8.2
Numerator	498	495	501	476	443
Denominator	56,537	56,307	54,976	55,998	54,189
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	8.2	8.1	8.1	8	8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	29.6	25.5	24	27.2	25
Annual Indicator	24.9	26.8	27.2	24.5	23.0
Numerator	196	214	206	195	182
Denominator	787,470	797,316	758,725	794,631	791,323
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	22	22	21	21	20
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 12

None

### FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
2. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
data for 2004 is not available yet. Resident data
3. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The Numbers for 2004 to be considered estimates. Pending 2004 datasets to be completed. Residence data
4. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
5. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2004 is not available. Residence data
6. **Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The Numbers for 2004 to be considered estimates. Pending 2004 datasets to be completed. Residence data
7. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
8. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data is not available for 2004. Residence data
9. **Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The Numbers for 2004 to be considered estimates. Pending 2004 datasets to be completed. Residence data
10. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
11. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for 2004 is not available. Residence data
12. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The Numbers for 2004 to be considered estimates. Pending 2004 datasets to be completed. Residence data

13. **Section Number:** Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The numbers for 2004 are estimates. Pending 2004 datasets to be completed. Residence data.

14. **Section Number:** Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Data not available for 2002.

15. **Section Number:** Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Data not available for 2004. Residence data

16. **Section Number:** Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The Numbers for 2004 to be considered estimates. Pending 2004 datasets to be completed. Residence data

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: SC**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

1

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

1

**Total Score:** 12

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None



**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: SC FY: 2006**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. 1. Improve data and surveillance systems to enhance and promote healthcare decision-making (Infrastructure Building Service).
2. 2. Assure that all women and children in SC have early and on-going access to screening, follow-up and treatment (metabolic, newborn hearing, developmental, psychosocial, high risk pre-conceptual and prenatal, lead, etc.) (Population-Based Service).
3. 3. Support a systems approach to assure coordinated services to family centered, high quality care for children, including assessment of developmental and psychosocial status, and care of chronic diseases through partnerships. (Enabling and Direct Health Care Services).
4. 4. Assure that all MCH populations in SC have a medical home (Enabling Service).
5. 5. Assure that patients in need of our services, including medical and psychosocial needs, will have entrée into a coordinated care system within the MCH Bureau, the Agency and beyond (Infrastructure Building Service).
6. 6. Reduce repeat teenage pregnancies, unintended pregnancies and inadequate spacing of births through widely available, adequately funded comprehensive, efficiently run family planning and support services (Enabling Service).
7. 7. Investigate the multiple socio-ecological conditions that contribute to the health disparities in SC to better target programs to the vulnerable populations (Infrastructure Building Service).
8. 8. Activate the FIMR (Fetal Infant Mortality Review) process in all 46 counties in SC (Population and Infrastructure Building Service).
9. 9. Increase initiation and continuation of breastfeeding through education and support (Enabling Service).
10. 10. Increase Bureau capacity to manage an ongoing Needs Assessment process, to include the ability to investigate and report epidemiologic causes of poor outcomes and health disparities and to create performance measures to guide better targeted, cost effective programs.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: SC

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Performance Managment	Our Agency is beginning to implement a performance management system and MCH Bureau responsibilities need to be an integral component.	National Perfomance Management Academy
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: SC**

SP # 1

**PERFORMANCE MEASURE:**

The percentage of Medicaid newborns in the state receiving a home visit.

**STATUS:**

Active

**GOAL**

To increase the percentage of Medicaid newborns in the state receiving a home visit.

**DEFINITION**

Number of home visits provided to Medicaid infants.

**Numerator:**

Number of infants who received a newborn home visit, resulting in a service paid for by Medicaid during the state fiscal year.

**Denominator:**

Number of Medicaid newborn infants who have received a newborn home visit service paid by Medicaid during the same state fiscal year.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The State Medicaid program.

**SIGNIFICANCE**

South Carolina is committed to ensure that its mothers are equipped with the most needed parenting skill as early as possible. By visiting the new moms at their home, the mother will be more comfortable to ask questions that she had not had a chance to at the birthing place. A home visit staff person provides preventive care including health promotion and education.

SP # 2

PERFORMANCE MEASURE:	Percent of women giving birth in the state whose pregnancy was unintended
STATUS:	Active
GOAL	Decrease the percentage of women delivering a baby in a given year who report that their pregnancy was unintended.
DEFINITION	<p>Percentage of women who report that their pregnancy was unintended.</p> <p><b>Numerator:</b> Number of women responding that they wanted to be pregnant later or did not want to be pregnant then or at any time in the future.</p> <p><b>Denominator:</b> Number of women surveyed.</p> <p><b>Units:</b> 100    <b>Text:</b> Percent</p>

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES	SC PRAMS survey of resident mothers delivering a live infant. Approximately 3000 women are surveyed each year. Denominator and numerator data are weighted by the CDC.
SIGNIFICANCE	Unintended pregnancies adversely impact maternal behaviors during pregnancy. Women with unintended pregnancies start prenatal care later, smoke and drink alcohol more, and suffer more from abuse. Unintended pregnancies are highest among teens, women with less than a high school education, Medicaid mothers, and women living in poverty.

SP # 3

**PERFORMANCE MEASURE:**

The number of school districts that are designated as Title V Providers. (Revised 2004)

**STATUS:**

Active

**GOAL**

To increase the proportion of school districts that are designated as Title V providers. Title V designation will hopefully increase school revenue that will result in the employment of more school nurses.

**DEFINITION**

Percent of school districts that are designated.

**Numerator:**

Number of school districts with contracts that designate them as Title V providers.

**Denominator:**

85, the number of school districts in the state

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Number of contracts.

**SIGNIFICANCE**

Schools can play a strong role in ensuring that children have access to needed primary care services. Health education in the schools can positively impact the behavior of children as they develop life long attitudes toward their own health and well being. This measure is part of a core public health assurance role for the health department.



SP # 4

**PERFORMANCE MEASURE:**

The state has a childhood injury prevention program in place

**STATUS:**

Active

**GOAL**

The state will have a childhood injury prevention program in place in every Health District.

**DEFINITION**

Implementation of any initiative/project seeking to prevent and/or reduce the incidence of injury resulting from falls, fire/flames, motor vehicle crashes, drownings, poisonings collectively in the state. These activities are guided by DHEC, Division of Injury and Disability Prevention. As funding becomes available to hire additional staff and support ongoing prevention strategies, the program definition/standard will become more comprehensive.

**Numerator:**

Number of Health Districts engaged in injury prevention initiatives/projects specific to an injury cause during the year that include an intentional injury component and which addresses more than one MCH population--self reported from District MCH plans.

**Denominator:**

12, the number of Public Health Districts in the state.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

MCH District plans.

**SIGNIFICANCE**

Unintentional injury is the leading cause of death among children ages 1-19 in South Carolina and the leading cause of potential life loss. This state performance measure is broad and provides the capacity for multi factorial local injury prevention efforts to be driven by local data and sensitive to local resource availability.

SP # 6

**PERFORMANCE MEASURE:**

Percent of adolescents who smoke

**STATUS:**

Active

**GOAL**

Decrease the proportion of high school students who smoke.

**DEFINITION**

Measure looks at self-reported data among high school students who attend public schools in the state, selected randomly to complete a survey.

**Numerator:**

Number of students responding that they had smoked cigarettes on one or more of the past 30 days.

**Denominator:**

Number of students responding to the survey.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Youth Risk Behavior Survey administered by the Department of Education, South Carolina. Only surveys public school high school students. Self-reported questionnaire.

**SIGNIFICANCE**

Tobacco use and addiction usually begin in adolescence. Tobacco use may also increase the probability that an adolescent will use other drugs. Tobacco use among adolescents increased in the 1990's nationwide, a serious public health problem.

SP # 7

**PERFORMANCE MEASURE:**

To implement in at least three health districts the comprehensive risk assessment form for prenatal presenting to the health department for services. (Revised 2004)

**STATUS:**

Active

**GOAL**

Increase the proportion of districts that perform comprehensive risk assessments for prenatal and follow up to ensure that they are linked to a OB provider.

**DEFINITION**

Health districts are performing the risk assessments using the Prenatal Risk Scoring form and providing follow up services through appointment confirmations.

**Numerator:**

Number of health districts who are performing risk assessments using the Prenatal Risk Scoring form and providing follow up services through appointment confirmations

**Denominator:**

12, the number of health districts in the state

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

District MCH plans, program reviews by state staff, and self-reports.

**SIGNIFICANCE**

There has been a tremendous shift in the provision of prenatal care in the state over the last 10 years. At one time, DHEC provided prenatal care in all counties, and now provides care in only two (2) of 46 counties. Despite this shift, first trimester entry has continued to increase, a tribute to the strong systems work going on in public health. However, DHEC continues to have an assurance role that goes beyond first trimester entry, to look at adequacy of care, and to ensure that barriers are being removed which will enable all women to not only access care in a timely manner, but in a way that is culturally appropriate, and which is based on a risk assessment.

SP #     9    

**PERFORMANCE MEASURE:**

Maintain continuation rates for DHEC Family Planning clients to at least 85 percent. (Revised 2004)

**STATUS:**

Active

**GOAL**

85 percent continuation rate by DHEC Family Planning clients.

**DEFINITION**

This measure refers to DHEC Family Planning clients and the goal of these clients to continue a chosen method of birth control.

**Numerator:**

Number of active DHEC Family Planning clients.

**Denominator:**

Number of active plus delinquent DHEC Family Planning clients.

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Family Planning data system.

**SIGNIFICANCE**

Family Planning clients who continue using a contraceptive method are less likely to become pregnant until they desire to.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: SC**

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	77.3	58.9	61.5	72.3	52.2
Numerator	2,046	1,562	1,633	1,928	1,464
Denominator	264,679	265,100	265,600	266,500	280,272
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	78.8	78.2	77.3	76.4	79.7
Numerator	39,897	40,802	40,305	39,441	42,066
Denominator	50,622	52,164	52,157	51,603	52,777
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	78.3	78.3	78.3	NaN	NaN
Numerator	27,692			0	0
Denominator	35,371			0	0
Is the Data Provisional or Final?				Provisional	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	81.4	83.7	84.9	82.7	84.6
Numerator	45,321	46,464	46,079	45,727	45,297
Denominator	55,698	55,521	54,249	55,273	53,520
Is the Data Provisional or Final?				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 07**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	39.6	44.1	51.4	55.9	56.4
Numerator	39,212	47,640	53,786	58,755	59,183
Denominator	98,919	108,022	104,691	105,162	104,881
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	30.1	27.8	23.7	20.4	18.4
Numerator	3,587	3,308	2,754	2,230	3,250
Denominator	11,914	11,918	11,633	10,944	17,689
Is the Data Provisional or Final?				Final	Final

## FORM NOTES FOR FORM 17

None

### FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data is for inpatient hospitalization.
2. **Section Number:** Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Numerator: FY2004  
Denominator : pop. age group estimation as of July 2004(Census)
3. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The data for 2001 and 2002 represents number of Medicaid eligibles less than 1 year old in the middle of the fiscal year.
4. **Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The denominator consists of those infants on the Medicaid recipient file(eligible) less than one as of the middle of the fiscal year. (Could have been born before the start of the fiscal year, but were still less than one in the fiscal year.)  
The reported numbers are for FY. The data from previous years was updated from ORS, because this year they were able to use Medicaid data.
5. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
There is not available data for 2001 and 2002.Schip enrollees are 1-18 years old.
6. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
There is not available data for 2001, 2002, 2003, because SCHIP enrollees are 1-18 years old.
7. **Section Number:** Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
There is not available data for 2001, 2002, 2003, 2004, because SCHIP enrollees are 1-18 years old.
8. **Section Number:** Health Systems Capacity Indicator #04  
**Field Name:** HSC04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
9. **Section Number:** Health Systems Capacity Indicator #04  
**Field Name:** HSC04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 birth dataset to be completed.
10. **Section Number:** Health Systems Capacity Indicator #07  
**Field Name:** HSC07  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 1998.
11. **Section Number:** Health Systems Capacity Indicator #08  
**Field Name:** HSC08  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data provided by Lisa Vosburgh (CSHCN)



**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: SC**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2003	Matching data files	<u>11.6</u>	<u>8.2</u>	<u>10.1</u>
b) Infant deaths per 1,000 live births	2002	Matching data files	<u>8</u>	<u>8.8</u>	<u>8.3</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2003	Matching data files	<u>70.1</u>	<u>83.4</u>	<u>76.2</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2003	Matching data files	<u>57.6</u>	<u>90.1</u>	<u>73.1</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)**  
**STATE: SC**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2003	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>19</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2003	<u>150</u> <u>    </u> <u>    </u>
c) Pregnant Women	2003	<u>185</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)**  
**STATE: SC**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2003	<u>    </u>
b) Medicaid Children (Age range <u>1</u> to <u>19</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2003	<u>150</u> <u>    </u> <u>    </u>
c) Pregnant Women	2003	<u>    </u>

## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The value of 111 to be considered " Not available".  
The number is used only to be able to save the form.
2. **Section Number:** Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The value of 111 to be considered " Not available".  
The number is used only to be able to save the form.
3. **Section Number:** Indicator 05  
**Field Name:** InfantDeath  
**Row Name:** Infant deaths per 1,000 live births  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
We are not able to link these 2 data sets together at this time with any degree of validity.
4. **Section Number:** Indicator 05  
**Field Name:** AdequateCare  
**Row Name:** Percent of pregnant women with adequate prenatal care  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 $16651/28933=0.576$  is the number of matching mothers w/delivery date falling within eligibility

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: SC**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	No
Annual linkage of birth certificates and WIC eligibility files	2	No
Annual linkage of birth certificates and newborn screening files	1	No
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	No
Annual birth defects surveillance system	1	No
Survey of recent mothers at least every two years (like PRAMS)	3	No

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: SC**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	No
Other:		

**HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity**  
*(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)*

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	No
Pediatric Nutrition Surveillance System (PedNSS)	3	Yes
WIC Program Data	3	Yes
Other:		

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

None

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: SC**

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	9.7	9.6	10.0	10.1	10.2
Numerator	5,412	5,349	5,453	5,586	5,454
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	8.0	7.9	8.3	8.2	8.4
Numerator	4,351	4,238	4,378	4,387	4,346
Denominator	54,270	53,954	52,746	53,591	51,939
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	2.0	1.9	1.9	2.1	2.1
Numerator	1,107	1,056	1,055	1,157	1,113
Denominator	55,964	55,748	54,453	55,461	53,692
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.6	1.5	1.5	1.7	1.7
Numerator	893	829	817	885	874
Denominator	54,270	53,954	52,746	53,591	51,939
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	10.5	11.9	12.0	9.7	8.7
Numerator	83	95	91	77	69
Denominator	787,466	797,316	758,725	794,631	791,323
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	6.6	6.3	6.9	4.3	3.7
Numerator	52	50	52	34	29
Denominator	787,466	797,316	758,725	794,631	791,323
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	39.3	41.8	44.1	36.6	40.3
Numerator	227	244	263	220	244
Denominator	577,091	584,181	596,563	600,304	605,789
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	10,340.5	10,563.9	11,101.0	9,897.2	9,229.5
Numerator	81,428	84,228	84,226	78,646	73,035
Denominator	787,466	797,316	758,725	794,631	791,323
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	679.1	684.4	671.1	640.5	627.1
Numerator	5,348	5,457	5,092	5,090	4,962
Denominator	787,466	797,316	758,725	794,631	791,323
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	3,334.7	3,098.5	3,013.8	2,995.8	2,714.5
Numerator	19,244	18,101	17,979	17,984	16,444
Denominator	577,091	584,181	596,563	600,304	605,789
Is the Data Provisional or Final?				Final	Provisional

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	25.9	33.3	35.0	37.4	44.7
Numerator	3,750	4,808	5,118	5,177	6,292
Denominator	144,584	144,584	146,337	138,356	140,829
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.1	9.6	9.2	9.9	12.1
Numerator	5,319	7,084	6,921	7,519	9,010
Denominator	744,962	739,733	749,125	760,422	743,286
Is the Data Provisional or Final?				Final	Final



## FORM NOTES FOR FORM 20

None

### FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Data not available for 2002.
2. **Section Number:** Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data
3. **Section Number:** Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed. Residence data.
4. **Section Number:** Health Status Indicator #01B  
**Field Name:** HSI01B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data
5. **Section Number:** Health Status Indicator #01B  
**Field Name:** HSI01B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed. Residence data
6. **Section Number:** Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data.
7. **Section Number:** Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed. Residence data
8. **Section Number:** Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data.
9. **Section Number:** Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed. Residence data
10. **Section Number:** Health Status Indicator #03A  
**Field Name:** HSI03A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data.
11. **Section Number:** Health Status Indicator #03A  
**Field Name:** HSI03A  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed.

Residence data. Denominator: Estimate of population as of July 2004

12. **Section Number:** Health Status Indicator #03B  
**Field Name:** HSI03B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data  
After the clarification from HRSA about this measure the data is changed to reflect the numbers only for children of age (1-14). Previous year data included infants.
13. **Section Number:** Health Status Indicator #03B  
**Field Name:** HSI03B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed.  
Residence data. Denominator: Estimate of population as of July 2004
14. **Section Number:** Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Residence data
15. **Section Number:** Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Data for 2004 is provisional. Pending 2004 dataset to be completed.  
Residence data. Denominator: Estimate of population as of July 2004
16. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The reporting year is FFY
17. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The reporting year is FFY. Denominator -Calendar year.
18. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Numerator -reported year is for FFY 2004. Denominator is estimate of the population group as of July, 2004
19. **Section Number:** Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The numerator is for FFY (2003-2004) . Denominator is population estimate as of July , 2004.
20. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Numerator: FFY2002-2003. Denominator: Population data as of July, 2003
21. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Numerator is for FFY(2003-2004). Denominator is an estimation as of July 2004.
22. **Section Number:** Health Status Indicator #05A  
**Field Name:** HSI05A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data for 2000, 2001 and 2002 is revised using more precise numbers.  
Source: Division of Epidemiology ( Terri Stephens) ( the denominators are using CY data.)
23. **Section Number:** Health Status Indicator #05A  
**Field Name:** HSI05A

**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Source: Division of Epidemiology ( Terri Stephens) ( the denominators are using CY data.)

24. **Section Number:** Health Status Indicator #05B  
**Field Name:** HSI05B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data for 2001 and 2002 is revised using more precise numbers.  
Source: Division of Epidemiology ( Terri Stephens)  
For each reporting year:  
The numerator is for FY  
The denominator is for CY, but from the previous year.  
Example: Year 2003  
Numerator: Fiscal Year 2003  
Denominator: Calendar Year 2002

25. **Section Number:** Health Status Indicator #05B  
**Field Name:** HSI05B  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Numerator: Fiscal Year 2004  
Denominator: Calendar Year 2003

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	56,452	34,663	19,728	140	593	41	1,287	
Children 1 through 4	223,820	137,506	78,348	707	2,430	132	4,697	
Children 5 through 9	270,272	165,455	96,299	1,037	2,764	146	4,571	
Children 10 through 14	297,231	176,741	113,049	1,102	2,612	133	3,594	
Children 15 through 19	293,851	178,909	107,766	1,228	2,883	156	2,909	
Children 20 through 24	311,938	194,502	109,050	1,462	3,930	288	2,706	
Children 0 through 24	1,453,564	887,776	524,240	5,676	15,212	896	19,764	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	53,438	3,014	
Children 1 through 4	213,828	9,992	
Children 5 through 9	261,281	8,991	
Children 10 through 14	289,481	7,750	
Children 15 through 19	285,607	8,244	
Children 20 through 24	296,612	15,326	
Children 0 through 24	1,400,247	53,317	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	480	140	293	0	1	1	2	43
Women 15 through 17	2,067	867	1,015	9	2	4	18	152
Women 18 through 19	4,801	2,209	2,182	24	15	9	32	330
Women 20 through 34	40,735	24,039	12,909	124	515	156	205	2,787
Women 35 or older	5,603	3,863	1,306	11	99	34	26	264
Women of all ages	53,686	31,118	17,705	168	632	204	283	3,576

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	427	52	1
Women 15 through 17	1,865	194	8
Women 18 through 19	4,385	400	16
Women 20 through 34	36,946	3,274	515
Women 35 or older	5,145	328	130
Women of all ages	48,768	4,248	670

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	480	218	247	0	4	1		10
Children 1 through 4	76	36	37	0	1	0	0	2
Children 5 through 9	38	22	15	0	1			
Children 10 through 14	68	38	29	0	1			
Children 15 through 19	244	162	77	3	1			1
Children 20 through 24	343	204	132	1	3	0	0	3
Children 0 through 24	1,249	680	537	4	11	1	0	16

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	427	25	28
Children 1 through 4	74	2	0
Children 5 through 9	30	3	5
Children 10 through 14	63	3	2
Children 15 through 19	218	18	8
Children 20 through 24	314	19	10
Children 0 through 24	1,126	70	53

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,141,626	693,274.0	415,190.0	4,214.0	11,282.0	608.0	17,058.0		2004
Percent in household headed by single parent	31.3	19.0	55.1	33.3	11.6	26.2	35.0		2004
Percent in TANF (Grant) families	3.1	1.6	5.8	2.2	0.6	2.5			2004
Number enrolled in Medicaid	462,176	176,011.0	244,328.0	864.0				40,973.0	2004
Number enrolled in SCHIP	100,445	41,262.0	54,464.0	152.0				4,567.0	2004
Number living in foster home care	4,871	2,152.0	2,509.0	9.0	9.0	4.0	148.0	40.0	2004
Number enrolled in food stamp program	290,309	110,337.0	178,513.0	659.0	680.0	120.0			2004
Number enrolled in WIC	60,174	25,132.0	34,284.0	118.0	467.0	110.0		63.0	2004
Rate (per 100,000) of juvenile crime arrests	4,015.7	3,266.9	5,532.8	1,213.4				936.2	2004
Percentage of high school drop-outs (grade 9 through 12)	3.2	3.1	3.5	4.7	2.0				2004

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,103,635.0	37,991.0		2004
Percent in household headed by single parent	31.4	26.2		2004
Percent in TANF (Grant) families	3.1	1.6		2004
Number enrolled in Medicaid	0	17,266.0	444,910.0	2004
Number enrolled in SCHIP	0	2,342.0	98,103.0	2004
Number living in foster home care	4,246.0	109.0	516.0	2004
Number enrolled in food stamp program	286,618.0	3,691.0		2004
Number enrolled in WIC	60,174.0	7,607.0		2004
Rate (per 100,000) of juvenile crime arrests	4,034.4	2,552.0		2004
Percentage of high school drop-outs (grade 9 through 12)	95.9	4.1		2004

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	791,337
Living in urban areas	681,289
Living in rural areas	454,489
Living in frontier areas	0
<b>Total - all children 0 through 19</b>	<b>1,135,778</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	3,883,329.0
Percent Below: 50% of poverty	6.5
100% of poverty	14.1
200% of poverty	33.5

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: SC**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,093,099.0
Percent Below: 50% of poverty	9.3
100% of poverty	19.1
200% of poverty	43.1



## FORM NOTES FOR FORM 21

Population data for 2004 is not available yet. The provided numbers are estimates. The "Total" category in each age group is provided by ORS (Census data estimates for 2004) and after that the numbers in race groups are calculated using 2003 race distribution.

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 07A  
**Field Name:** Race\_Women15  
**Row Name:** Women < 15  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
2. **Section Number:** Indicator 07A  
**Field Name:** Race\_Women15to17  
**Row Name:** Women 15 through 17  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
3. **Section Number:** Indicator 07A  
**Field Name:** Race\_Women18to19  
**Row Name:** Women 18 through 19  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
4. **Section Number:** Indicator 07A  
**Field Name:** Race\_Women20to34  
**Row Name:** Women 20 through 34  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
5. **Section Number:** Indicator 07A  
**Field Name:** Race\_Women35  
**Row Name:** Women 35 or older  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
6. **Section Number:** Indicator 07B  
**Field Name:** Ethnicity\_Women15  
**Row Name:** Women < 15  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
7. **Section Number:** Indicator 07B  
**Field Name:** Ethnicity\_Women15to17  
**Row Name:** Women 15 through 17  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
8. **Section Number:** Indicator 07B  
**Field Name:** Ethnicity\_Women18to19  
**Row Name:** Women 18 through 19  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
9. **Section Number:** Indicator 07B  
**Field Name:** Ethnicity\_Women20to34  
**Row Name:** Women 20 through 34  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
10. **Section Number:** Indicator 07B  
**Field Name:** Ethnicity\_Women35  
**Row Name:** Women 35 or older  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is to be considered provisional, because Master birth YTD2004 is used. There are the total of 6 births with unknown mother's age.
11. **Section Number:** Indicator 08A  
**Field Name:** S08\_Race\_Infants  
**Row Name:** Infants 0 to 1  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
12. **Section Number:** Indicator 08A  
**Field Name:** S08\_Race\_Children1to4

- Row Name:** children 1 through 4  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
13. **Section Number:** Indicator 08A  
**Field Name:** S08\_Race\_Children5to9  
**Row Name:** children 5 through 9  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
14. **Section Number:** Indicator 08A  
**Field Name:** S08\_Race\_Children10to14  
**Row Name:** children 10 through 14  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
15. **Section Number:** Indicator 08A  
**Field Name:** S08\_Race\_Children15to19  
**Row Name:** children 15 through 19  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
16. **Section Number:** Indicator 08A  
**Field Name:** S08\_Race\_Children20to24  
**Row Name:** children 20 through 24  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
17. **Section Number:** Indicator 08B  
**Field Name:** S08\_Ethnicity\_Infants  
**Row Name:** Infants 0 to 1  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
18. **Section Number:** Indicator 08B  
**Field Name:** S08\_Ethnicity\_Children1to4  
**Row Name:** children 1 through 4  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
19. **Section Number:** Indicator 08B  
**Field Name:** S08\_Ethnicity\_Children5to9  
**Row Name:** children 5 through 9  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
20. **Section Number:** Indicator 08B  
**Field Name:** S08\_Ethnicity\_Children10to14  
**Row Name:** children 10 through 14  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
21. **Section Number:** Indicator 08B  
**Field Name:** S08\_Ethnicity\_Children15to19  
**Row Name:** children 15 through 19  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
22. **Section Number:** Indicator 08B  
**Field Name:** S08\_Ethnicity\_Children20to24  
**Row Name:** children 20 through 24  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The numbers are estimates for 2004, provided by VR-Biostatistics
23. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_Children  
**Row Name:** All children 0 through 19  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Total numbers are estimates for 2004 from ORS(Census).  
The race breakdown numbers are estimates using the 2003 race distribution.
24. **Section Number:** Indicator 09A

**Field Name:** HSIRace\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2006  
**Field Note:**

Data provided from ORS is from census data 2000. We used these numbers as estimates for 2004, because no other data is available.

25. **Section Number:** Indicator 09A

**Field Name:** HSIRace\_MedicaidNo  
**Row Name:** Number enrolled in Medicaid  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data reported is for state fiscal year 2004.

26. **Section Number:** Indicator 09A

**Field Name:** HSIRace\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided is for CY 2003. It should be considered estimates for 2004.  
No other data available yet.  
Data reported under category -" Other and unknown " is for Aian, Native Hawaiian or other pacific Islander combined.

27. **Section Number:** Indicator 09A

**Field Name:** HSIRace\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The provided data is for school year 2002-2003.

28. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data is for 2000 (Census)and it is provided from ORS as estimates for 2004 , because no other data is available..

29. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_MedicaidNo  
**Row Name:** Number enrolled in Medicaid  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
State fiscal Year 2004. The value of "0" should be consider as Not available.

30. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
State fiscal Year 2004. The value of "0" should be consider as Not available.

31. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The data provided is for CY2003

32. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data reported is for school year 2003-2003. We use it as estimate for 2004 because no other data is available.

33. **Section Number:** Indicator 10

**Field Name:** Metropolitan  
**Row Name:** Living in metropolitan areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.

34. **Section Number:** Indicator 10

**Field Name:** Urban  
**Row Name:** Living in urban areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.

35. **Section Number:** Indicator 10

**Field Name:** Rural  
**Row Name:** Living in rural areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.

36. **Section Number:** Indicator 10  
**Field Name:** Frontier  
**Row Name:** Living in frontier areas  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Not available
37. **Section Number:** Indicator 11  
**Field Name:** S11\_total  
**Row Name:** Total Population  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.
38. **Section Number:** Indicator 11  
**Field Name:** S11\_50percent  
**Row Name:** Percent Below: 50% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.
39. **Section Number:** Indicator 11  
**Field Name:** S11\_100percent  
**Row Name:** 100% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.
40. **Section Number:** Indicator 11  
**Field Name:** S11\_200percent  
**Row Name:** 200% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.
41. **Section Number:** Indicator 12  
**Field Name:** S12\_Children  
**Row Name:** Children 0 through 19 years old  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.
42. **Section Number:** Indicator 12  
**Field Name:** S12\_50percent  
**Row Name:** Percent Below: 50% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.
43. **Section Number:** Indicator 12  
**Field Name:** S12\_200percent  
**Row Name:** 200% of poverty  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data provided by ORS are from 2000 (Census) and are used as estimates for 2004 because no other data is available.

**NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: SC**

SP # 1

**PERFORMANCE MEASURE:**

Increase the percent of infant screening data systems for metabolic, hearing, birth defects, and very low birth weight linked with birth certificate data.

**GOAL**

**DEFINITION**

**Numerator:**

**Denominator:**

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
64	66	68	70	70

SP # 2

**PERFORMANCE MEASURE:** Increase the percent of newborns receiving a newborn home visit.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 3

**PERFORMANCE MEASURE:** Increase the number of comprehensive medical home partnerships for pregnant women, children and CYSHCN.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 4

**PERFORMANCE MEASURE:** Increase the percent of MCH programs that utilize a scorecard of measures to monitor progress.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:** Text: 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------



SP # 5

**PERFORMANCE MEASURE:** Decrease the percent of family planning clients served by health departments whose pregnancy was unintended.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 6

PERFORMANCE MEASURE:

Increase the number of MCH programs that utilized research findings to better target programs to vulnerable populations.

GOAL

DEFINITION

Numerator:

Denominator:

Units: Text: 0

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

SIGNIFICANCE

OBJECTIVE

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 7

**PERFORMANCE MEASURE:**

Increase the number of health departments who implemented a review process for fetal and infant deaths.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:** Text: 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 8

**PERFORMANCE MEASURE:** Increase the percent of infants who are breastfed at birth and thereafter.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 9

**PERFORMANCE MEASURE:**

Increase the percent of Medicaid children less than 2 years old served in comprehensive medical home partnerships that receive a developmental screening and follow up.

**GOAL**

**DEFINITION**

**Numerator:**

**Denominator:**

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

SP # 10

**PERFORMANCE MEASURE:** Increase the percent of pregnant women who are health department clients who are risk assessed and referred.

**GOAL**

**DEFINITION**

**Numerator:**  
**Denominator:**  
**Units:** Text: 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
------	------	------	------	------

